į	HO. OF COMIES PEC	10				
	DISTRIBUTIO					
	SANTA FE					
	FILE			_		
	U.S.G.3,					
	LAND OFFICE					
1.	TRANSPORTER	OIL	1			
		GAS	1			
	OPERATOR		2			
	PRORATION OFFICE					
	Operator					
	Northwest Pipeline Co					
	Address		-		. 1	

	DISTRIBUTION  SANTA FE  FILE  U.S.G.3,  LAND OFFICE	NEW MEXICO OIL C REQUEST AUTHORIZATION TO TRA	Form C-10s Supersedes Old C-104 and C-110 Effective 1-1-65				
	IRANSPORTER OIL / GAS / OPERATOR Z						
1.	PRORATION OFFICE Operator	Company					
	Northwest Pipeline Corporation  Address						
	P.O. Box 90, Farmington, New Mexico 87401  Reason(s) for filling (Check proper box)  Other (Please explain)						
	New Well  Recompletion  Change in Ownership	Change in Transporter of: Oil Dry Ga Casinghead Gas Conder	is [				
	If change of ownership give name and address of previous owner						
	DESCRIPTION OF WELL AND	LEASE					
	San Juan 29-6 Unit	Well No. Pool Name, Including F 26A Blanco Mesa Ve	t .	1 20000 1101			
	Location Unit Letter; 118	O Feet From The North Lin	se andFeet From '	The West			
	Line of Section 13 Tow	mship 29N Range 6	5W , NMPM, R	io Arriba County			
III.	DESIGNATION OF TRANSPORT		AS Address (Give address to which appro	und conv of this form in to be cent.			
	Northwest Pipeline	Corporation	3539 E 30th St., Farmin	gton, New Mexico 87401			
	Name of Authorized Transporter of Cas Northwest Pipeline		Address (Give address to which appro 3539 E 30th St., Fannin	.1			
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Age.	Is gas actually connected? Wh				
	If this production is commingled wit	h that from any other lease or pool,	give commingling order number:				
24,	Designate Type of Completion		New Well Workover Deeper.	Plug Back   Same Res'v. Diff. Res'v.			
	Date Spudded 4-28-78	Date Compl. Ready to Prod. 8-4-78	Total Depth 6070'	P.B.T.D. 6015'			
	Elevations (DF, RKB, RT, GR, etc.) 6763 GR	Name of Producing Formation  Mesa Verde	Top Otl/Gas Pay 5498 '	Tubing Depth 59491			
	Ferforations 5498' to 5984'	nesa verae	0.30	Depth Casing Shoe			
	3436 (0 3304	TUBING, CASING, AND	CEMENTING RECORD				
	HOLE SIZE	9-5/8"	194'	SACKS CEMENT			
	8-3/4"	7"	3980 '	160			
	6-1/4"	4-1/2" liner 2-3/8" tbg	3833'-6070' 5949'	210			
٧.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top able for this depth or be for full 24 hours)						
	Eate First New Cil Run To Tanks	Date of Test 8-4-78	Producing Method (Flow, pump, gas li Flow	ft, etc.)			
	Length of Test	Tubing Pressure	Casing Pressure	Chok Sit			
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	GO NO TO COM			
			<del>. استان در این این این این این این این این این این</del>	Appropried 3			
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbis. Condanagte/MMCF	Gravity of Conde Neate			
	CV 3211 AOF 7059 Testing Method (pitot, back pr.)	3 hrs Tubing Pressure (Shut-in)	Coming Pressure (Shat-in)	Choke Size			
	Back pressure	809 psig	809 psig	2"X 0.750"			
VI.	CERTIFICATE OF COMPLIANCE	CE	OIL CONSERVATION COMMISSION				
	I hereby certify that the rules and r Commission have been complied w	ith and that the information given	BY Original Signed by A. R. Kendrick  SUPERVISOR DIST. #3  This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.				
	above is true and complete to the	best of my knowledge and belief.					
	121	f 4!					
	7-1016ac (Signal Production (						
	Production (	!e)	All sections of this form must be filled out completely for allowable on new and recompleted wells.				
	August 10	, 1978	Fill out only Sections I. II. III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.				
	(		Separate Forms C-104 must be filed for each pool in multiply completed wells.				